

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

MADISON PROJECT INC.

ADDRESS (number and street)

1155 - 15th STREET NW

SUITE 614

☐Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00298000

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☒July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2007

through

06

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

SCOTT B MACKENZIE

Signature of Treasurer

Electronically Filed by SCOTT B MACKENZIE

Date

07

31

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
MADISON PROJECT INC.

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2007		36748.53
(b) Cash on Hand at Beginning of Reporting Period	36748.53	
(c) Total Receipts (from Line 19)	98786.24	98786.24
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	135534.77	135534.77
7. Total Disbursements (from Line 31)	96775.94	96775.94
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	38758.83	38758.83
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	117204.30	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
MADISON PROJECT INC.

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	7250.00	7250.00
(ii) Unitemized	90029.00	90029.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	97279.00	97279.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	97279.00	97279.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	1507.24	1507.24
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	98786.24	98786.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	98786.24	98786.24

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	95775.94	95775.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	95775.94	95775.94
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	1000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	96775.94	96775.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	96775.94	96775.94

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	97279.00	97279.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	97279.00	97279.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	95775.94	95775.94
37. Offsets to Operating Expenditures (from Line 15, page 3)	1507.24	1507.24
38. Net Operating Expenditures (subtract Line 37 from Line 36)	94268.70	94268.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial)
MR ELLIOT BAINES 329
Mailing Address 360 INDIAN HARBOR RD

City State Zip Code
VERO BEACH FL 32963

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.4170

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
MR DARRELL BOYD 554
Mailing Address 6816 CHEYENNE CIR

City State Zip Code
MINNEAPOLIS MN 55439

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.4273

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
MR JOHN R BREHMER 329
Mailing Address 201 SEABREEZE CT

City State Zip Code
VERO BEACH FL 32963

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.4288

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial)
MRS JUDITH A HOUK 460
Mailing Address 10801 CLUB POINT DR

City State Zip Code
FISHERS IN 46037

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.4912

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
MRS PHYLLIS L LASKOWSKI 462
Mailing Address 7802 EAGLE CREEK OVERLOOK DR

City State Zip Code
INDIANAPOLIS IN 46254

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 7

Transaction ID: SA11A1.5185

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
MR KENNETH C MCCORMICK 770
Mailing Address 11622 GLENORA DR

City State Zip Code
HOUSTON TX 77065

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.5343

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial)
MR RAY P ODEN 711, JR

Mailing Address 702 THORA BLVD

City State Zip Code
SHREVEPORT LA 71106

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.5494

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
MR DON REED 762

Mailing Address 2201 E HICKORY HILL RD

City State Zip Code
ARGYLE TX 76226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.5642

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
MR MAURICE J REESE 537

Mailing Address 713 LAKEWOOD BLVD

City State Zip Code
MADISON WI 53704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.5649

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial)
MR LUNSFORD RICHARDSON 068, JR

Mailing Address **7 INDIAN SPRING RD**

City State Zip Code
NORWALK CT 06853

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

03 / 14 / 2007

Transaction ID: SA11A1.5677

Amount of Each Receipt this Period

400.00

B. Full Name (Last, First, Middle Initial)
MR J MERWIN SEAY 752

Mailing Address **6950 JOYCE WAY**

City State Zip Code
DALLAS TX 75225

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 06 / 2007

Transaction ID: SA11A1.5801

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
MR PAUL SJOLUND 553

Mailing Address **4790 BAYCLIFFE RD**

City State Zip Code
EXCELSIOR MN 55331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 23 / 2007

Transaction ID: SA11A1.5835

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial)

MR JACQUES VINMONT 334, JR

Mailing Address 21 ASPEN CT

City State Zip Code
 BOYNTON BEACH FL 33436

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.6055

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

MR JOHN F WOODHOUSE 770

Mailing Address 650 RAMBLEWOOD RD

City State Zip Code
 HOUSTON TX 77079

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 4 / 2 0 0 7

Transaction ID: SA11A1.6205

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

7250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 36

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial)
CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW ROAD

City State Zip Code
STERLING VA 20166

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.16

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 7

Transaction ID: SA15.6977

Amount of Each Receipt this Period

1265.16

REFUND

B. Full Name (Last, First, Middle Initial)
CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW ROAD

City State Zip Code
STERLING VA 20166

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1507.24

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 8 / 2 0 0 7

Transaction ID: SA15.6978

Amount of Each Receipt this Period

242.08

REFUND

SUBTOTAL of Receipts This Page (optional)

1507.24

TOTAL This Period (last page this line number only)

1507.24

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. ACCESS NATIONAL BANK

Mailing Address 1800 ROBERT FULTON DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
SERVICE CHARGE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6910

Date of Disbursement

03 / 30 / 2007

Amount of Each Disbursement this Period

31.18

Full Name (Last, First, Middle Initial)

B. ACCESS NATIONAL BANK

Mailing Address 1800 ROBERT FULTON DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
AMEX DISCOUNT FEE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6911

Date of Disbursement

03 / 30 / 2007

Amount of Each Disbursement this Period

3.90

Full Name (Last, First, Middle Initial)

C. ACCESS NATIONAL BANK

Mailing Address 1800 ROBERT FULTON DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
MERCHANT SERVICE FEE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6912

Date of Disbursement

04 / 03 / 2007

Amount of Each Disbursement this Period

1.74

SUBTOTAL of Disbursements This Page (optional)

36.82

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. ACCESS NATIONAL BANK

Mailing Address 1800 ROBERT FULTON DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
MERCHANT SERVICE FEE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6913

Date of Disbursement

04 / 03 / 2007

Amount of Each Disbursement this Period

1.90

Full Name (Last, First, Middle Initial)

B. ACCESS NATIONAL BANK

Mailing Address 1800 ROBERT FULTON DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
MERCHANT SERVICE FEE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6914

Date of Disbursement

04 / 03 / 2007

Amount of Each Disbursement this Period

48.70

Full Name (Last, First, Middle Initial)

C. ACCESS NATIONAL BANK

Mailing Address 1800 ROBERT FULTON DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
SERVICE FEE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6915

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

66.50

SUBTOTAL of Disbursements This Page (optional)

117.10

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. ACCESS NATIONAL BANK

Mailing Address 1800 ROBERT FULTON DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
AMEX DISCOUNT FEE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6916

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

6.33

Full Name (Last, First, Middle Initial)

B. ACCESS NATIONAL BANK

Mailing Address 1800 ROBERT FULTON DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
DISCOVER DISCOUNT FEE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6917

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

3.47

Full Name (Last, First, Middle Initial)

C. ACCESS NATIONAL BANK

Mailing Address 1800 ROBERT FULTON DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
MERCHANT SERVICE FEE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6918

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

42.95

SUBTOTAL of Disbursements This Page (optional)

52.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. ACCESS NATIONAL BANK

Mailing Address 1800 ROBERT FULTON DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
SERVICE CHARGE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6919

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

34.59

Full Name (Last, First, Middle Initial)

B. ACCESS NATIONAL BANK

Mailing Address 1800 ROBERT FULTON DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
MERCHANT SERVICE CHARGE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6920

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

33.10

Full Name (Last, First, Middle Initial)

C. ACCESS NATIONAL BANK

Mailing Address 1800 ROBERT FULTON DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
DISCOVER DISCOUNT FEE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6921

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

1.85

SUBTOTAL of Disbursements This Page (optional)

69.54

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. ACCESS NATIONAL BANK

Mailing Address 1800 ROBERT FULTON DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
SERVICE CHARGE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6922

Date of Disbursement

06 / 29 / 2007

Amount of Each Disbursement this Period

131.51

Full Name (Last, First, Middle Initial)

B. ACCESS NATIONAL BANK

Mailing Address 1800 ROBERT FULTON DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
AMEX DISCOUNT FEE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6923

Date of Disbursement

06 / 29 / 2007

Amount of Each Disbursement this Period

25.79

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 5800 WINDWARD PKWY

City ALPHARETTA State GA Zip Code 30005

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6873

Date of Disbursement

02 / 06 / 2007

Amount of Each Disbursement this Period

909.75

SUBTOTAL of Disbursements This Page (optional)

1067.05

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. ADP Full Name (Last, First, Middle Initial) Mailing Address 5800 WINDWARD PKWY City ALPHARETTA State GA Zip Code 30005 Purpose of Disbursement SERVICE CHARGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.6868 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 63.31
B. ADP Full Name (Last, First, Middle Initial) Mailing Address 5800 WINDWARD PKWY City ALPHARETTA State GA Zip Code 30005 Purpose of Disbursement PAYROLL TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.6874 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 988.10
C. ADP Full Name (Last, First, Middle Initial) Mailing Address 5800 WINDWARD PKWY City ALPHARETTA State GA Zip Code 30005 Purpose of Disbursement SERVICE CHARGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.6869 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 7 Amount of Each Disbursement this Period 68.32

SUBTOTAL of Disbursements This Page (optional) ►

1119.73

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. ADP Full Name (Last, First, Middle Initial) Mailing Address 5800 WINDWARD PKWY City ALPHARETTA State GA Zip Code 30005 Purpose of Disbursement PAYROLL TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.6875 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 7 Amount of Each Disbursement this Period 706.75
B. ADP Full Name (Last, First, Middle Initial) Mailing Address 5800 WINDWARD PKWY City ALPHARETTA State GA Zip Code 30005 Purpose of Disbursement SERVICE CHARGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.6870 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 68.32
C. ADP Full Name (Last, First, Middle Initial) Mailing Address 5800 WINDWARD PKWY City ALPHARETTA State GA Zip Code 30005 Purpose of Disbursement PAYROLL TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.6876 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7 Amount of Each Disbursement this Period 793.90

SUBTOTAL of Disbursements This Page (optional) ►

1568.97

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial)
ADP

Mailing Address 5800 WINDWARD PKWY

City ALPHARETTA State GA Zip Code 30005

Purpose of Disbursement
SERVICE CHARGE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6871

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

75.72

B. Full Name (Last, First, Middle Initial)

ADP

Mailing Address 5800 WINDWARD PKWY

City ALPHARETTA State GA Zip Code 30005

Purpose of Disbursement
SERVICE CHARGE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6872

Date of Disbursement

05 / 16 / 2007

Amount of Each Disbursement this Period

10.00

C. Full Name (Last, First, Middle Initial)

ADP

Mailing Address 5800 WINDWARD PKWY

City ALPHARETTA State GA Zip Code 30005

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6877

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

787.35

SUBTOTAL of Disbursements This Page (optional)

873.07

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial)
ADP

Mailing Address 5800 WINDWARD PKWY

City State Zip Code
ALPHARETTA GA 30005

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6878

Date of Disbursement

06 / 28 / 2007

Amount of Each Disbursement this Period

787.35

B. Full Name (Last, First, Middle Initial)
BLEPO INC

Mailing Address 6001 BRIDGE STREET

City State Zip Code
FORT WORTH TX 76112

Purpose of Disbursement
WEB DEVELOPMENT

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6837

Date of Disbursement

05 / 16 / 2007

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
BMW DIRECT INC

Mailing Address 1155 - 15TH ST, NW

City State Zip Code
WASHINGTON DC 20005

Purpose of Disbursement
DIRECT MAIL FUNDRAISING FOR TMP

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6960

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

1511.45

SUBTOTAL of Disbursements This Page (optional)

2798.80

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW ROAD

City STERLING State VA Zip Code 20166

Purpose of Disbursement
DIRECT MAIL FUNDRAISING FOR TMP

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.6961

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

2531.40

B. FALCON PRINTING & COPYING INC

Mailing Address 1921 GALLOWS ROAD

City VIENNA State VA Zip Code 22182

Purpose of Disbursement
STATIONARY

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.6929

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

388.50

C. MACKENZIE & COMPANY

Mailing Address 1155 - 15TH ST, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
CONSULTING - COMPLIANCE

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.6839

Date of Disbursement

04 / 11 / 2007

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

5919.90

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

<p>Full Name (Last, First, Middle Initial) A. MACKENZIE & COMPANY</p>		<p>Transaction ID: SB21B.6840 Date of Disbursement</p>	
<p>Mailing Address 1155 - 15TH ST, NW</p>		<p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>	
<p>City WASHINGTON</p>	<p>State DC</p>	<p>Zip Code 20005</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement CONSULTING - COMPLIANCE</p>		<p><input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="1"/> Category/ Type</p>	<p><input type="text" value="1"/> <input type="text" value="5"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p>
<p>Candidate Name</p>			
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			
<p>Full Name (Last, First, Middle Initial) B. MACKENZIE & COMPANY</p>		<p>Transaction ID: SB21B.6841 Date of Disbursement</p>	
<p>Mailing Address 1155 - 15TH ST, NW</p>		<p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>	
<p>City WASHINGTON</p>	<p>State DC</p>	<p>Zip Code 20005</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement CONSULTING - COMPLIANCE</p>		<p><input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="1"/> Category/ Type</p>	<p><input type="text" value="1"/> <input type="text" value="5"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p>
<p>Candidate Name</p>			
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			
<p>Full Name (Last, First, Middle Initial) C. MACKENZIE & COMPANY</p>		<p>Transaction ID: SB21B.6842 Date of Disbursement</p>	
<p>Mailing Address 1155 - 15TH ST, NW</p>		<p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p>	
<p>City WASHINGTON</p>	<p>State DC</p>	<p>Zip Code 20005</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement CONSULTING - COMPLIANCE</p>		<p><input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="1"/> Category/ Type</p>	<p><input type="text" value="1"/> <input type="text" value="5"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p>
<p>Candidate Name</p>			
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. PATRIOT PARTNERS INC

Mailing Address 1155 - 15TH ST, NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
DIRECT MAIL FUNDRAISING FOR TMP

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.6962

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3959.39

Full Name (Last, First, Middle Initial)

B. PATRIOT PARTNERS INC

Mailing Address 1155 - 15TH ST, NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
DIRECT MAIL FUNDRAISING FOR TMP

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.6963

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10500.00

Full Name (Last, First, Middle Initial)

C. PATRIOT PARTNERS INC

Mailing Address 1155 - 15TH ST, NW

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
DIRECT MAIL FUNDRAISING FOR TMP

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.6964

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

16959.39

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. PATRIOT PARTNERS INC

Mailing Address 1155 - 15TH ST, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL FUNDRAISING FOR TMP

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6965

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

1367.42

Full Name (Last, First, Middle Initial)

B. PATRIOT PARTNERS INC

Mailing Address 1155 - 15TH ST, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL FUNDRAISING FOR TMP

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6966

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

6086.06

Full Name (Last, First, Middle Initial)

C. PATRIOT PARTNERS INC

Mailing Address 1155 - 15TH ST, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL FUNDRAISING FOR TMP

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6967

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

2124.65

SUBTOTAL of Disbursements This Page (optional)

9578.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. PATRIOT PARTNERS INC

Mailing Address 1155 - 15TH ST, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL FUNDRAISING FOR TMP

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6968

Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

B. PATRIOT PARTNERS INC

Mailing Address 1155 - 15TH ST, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL FUNDRAISING FOR TMP

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6969

Date of Disbursement

06 / 20 / 2007

Amount of Each Disbursement this Period

13000.00

Full Name (Last, First, Middle Initial)

C. PATRIOT PARTNERS INC

Mailing Address 1155 - 15TH ST, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL FUNDRAISING FOR TMP

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6970

Date of Disbursement

06 / 27 / 2007

Amount of Each Disbursement this Period

13093.25

SUBTOTAL of Disbursements This Page (optional)

27293.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. POTENTIALS BUSINESS SERVICES

Mailing Address 5414 RUBY DR

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
TREASURERS & OFFICE SERVICES

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6848

Date of Disbursement

01 / 12 / 2007

Amount of Each Disbursement this Period

8217.43

Full Name (Last, First, Middle Initial)

B. ANDREW RYUN

Mailing Address 155 DUDDINGTON PL SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
NET PAYROLL

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6859

Date of Disbursement

02 / 23 / 2007

Amount of Each Disbursement this Period

461.75

Full Name (Last, First, Middle Initial)

C. ANDREW RYUN

Mailing Address 155 DUDDINGTON PL SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
NET PAYROLL

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6860

Date of Disbursement

03 / 29 / 2007

Amount of Each Disbursement this Period

461.75

SUBTOTAL of Disbursements This Page (optional)

9140.93

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) ANDREW RYUN		Transaction ID: SB21B.6835 Date of Disbursement <div> <div>MM / DD / YYYY</div> <div>04 / 04 / 2007</div> </div>
Mailing Address 155 DUDDINGTON PL SE		Amount of Each Disbursement this Period <div>144.55</div>
City WASHINGTON State DC Zip Code 20003		
Purpose of Disbursement TRAVEL EXPENSE REIMB	<div>001</div> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) ANDREW RYUN		Transaction ID: SB21B.6861 Date of Disbursement <div> <div>MM / DD / YYYY</div> <div>04 / 30 / 2007</div> </div>
Mailing Address 155 DUDDINGTON PL SE		Amount of Each Disbursement this Period <div>461.75</div>
City WASHINGTON State DC Zip Code 20003		
Purpose of Disbursement NET PAYROLL	<div>001</div> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) ANDREW RYUN		Transaction ID: SB21B.6862 Date of Disbursement <div> <div>MM / DD / YYYY</div> <div>05 / 30 / 2007</div> </div>
Mailing Address 155 DUDDINGTON PL SE		Amount of Each Disbursement this Period <div>461.75</div>
City WASHINGTON State DC Zip Code 20003		
Purpose of Disbursement NET PAYROLL	<div>001</div> Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1068.05

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial)
ANDREW RYUN

Mailing Address 155 DUDDINGTON PL SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
NET PAYROLL

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6863

Date of Disbursement

06 / 29 / 2007

Amount of Each Disbursement this Period

461.75

B. Full Name (Last, First, Middle Initial)
NED RYUN

Mailing Address 608 SOUTH MAPLE AVE

City PURCELLVILLE State VA Zip Code 20132

Purpose of Disbursement
NET PAYROLL

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6853

Date of Disbursement

02 / 07 / 2007

Amount of Each Disbursement this Period

1808.75

C. Full Name (Last, First, Middle Initial)
NED RYUN

Mailing Address 608 SOUTH MAPLE AVE

City PURCELLVILLE State VA Zip Code 20132

Purpose of Disbursement
NET PAYROLL

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6854

Date of Disbursement

02 / 23 / 2007

Amount of Each Disbursement this Period

1808.75

SUBTOTAL of Disbursements This Page (optional)

4079.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) NED RYUN		Transaction ID: SB21B.6855 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 9 / 2 0 0 7</div> </div>
Mailing Address 608 SOUTH MAPLE AVE		Amount of Each Disbursement this Period <div>1530.33</div>
City PURCELLVILLE State VA Zip Code 20132		
Purpose of Disbursement NET PAYROLL	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) NED RYUN		Transaction ID: SB21B.6856 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div>
Mailing Address 608 SOUTH MAPLE AVE		Amount of Each Disbursement this Period <div>1447.00</div>
City PURCELLVILLE State VA Zip Code 20132		
Purpose of Disbursement NET PAYROLL	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) NED RYUN		Transaction ID: SB21B.6846 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 6 / 2 0 0 7</div> </div>
Mailing Address 608 SOUTH MAPLE AVE		Amount of Each Disbursement this Period <div>130.99</div>
City PURCELLVILLE State VA Zip Code 20132		
Purpose of Disbursement BOARD LUNCH & STATIONARY	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

3108.32

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. NED RYUN Full Name (Last, First, Middle Initial) Mailing Address 608 SOUTH MAPLE AVE City PURCELLVILLE State VA Zip Code 20132 Purpose of Disbursement NET PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.6857 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7 Amount of Each Disbursement this Period 1447.00 Category/Type 001
B. NED RYUN Full Name (Last, First, Middle Initial) Mailing Address 608 SOUTH MAPLE AVE City PURCELLVILLE State VA Zip Code 20132 Purpose of Disbursement NET PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.6858 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7 Amount of Each Disbursement this Period 1447.00 Category/Type 001
C. US POSTMASTER Full Name (Last, First, Middle Initial) Mailing Address MERRIFIELD City VIENNA State VA Zip Code 22182 Purpose of Disbursement PO BOX RENTAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.6935 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Amount of Each Disbursement this Period 434.00 Category/Type 001

SUBTOTAL of Disbursements This Page (optional)

3328.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 / 36

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PL

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
MONEY PROCESSING & ESCROW

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.6971

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

325.00

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PL

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
MONEY PROCESSING & ESCROW

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.6972

Date of Disbursement

03 / 02 / 2007

Amount of Each Disbursement this Period

47.50

Full Name (Last, First, Middle Initial)

C. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PL

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
MONEY PROCESSING & ESCROW

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.6973

Date of Disbursement

04 / 19 / 2007

Amount of Each Disbursement this Period

313.90

SUBTOTAL of Disbursements This Page (optional)

686.40

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PL

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
MONEY PROCESSING & ESCROW

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6974

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

323.74

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PL

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
MONEY PROCESSING & ESCROW

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.6975

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

872.74

SUBTOTAL of Disbursements This Page (optional)

1196.48

TOTAL This Period (last page this line number only)

94561.93

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. KANSAS REPUBLICAN PARTY - FEDERAL

Mailing Address 2025 SW Gage Boulevard

City Topeka State KS Zip Code 66604

Purpose of Disbursement
CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.6950

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
BMW DIRECT INCNature of Debt (Purpose):
DIRECT MAIL FUNDRAISING
FOR TMP

Mailing Address 1155 - 15TH ST, NW

City State ZIP Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.6951

Amount Incurred This Period

28296.08

Payment This Period

1511.45

Outstanding Balance at Close of This Period

26784.63

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CENTURY DATA SYSTEMSNature of Debt (Purpose):
DATA PROCESSING

Mailing Address 1155 - 15TH ST, NW

City State ZIP Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.6952

Amount Incurred This Period

6194.72

Payment This Period

0.00

Outstanding Balance at Close of This Period

6194.72

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
COLORTREE OF VIRGINIANature of Debt (Purpose):
DIRECT MAIL FUNDRAISING
FOR TMP

Mailing Address 2519 BRITTONS HILL RD

City State ZIP Code
RICHMOND VA 23230

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.6953

Amount Incurred This Period

9610.65

Payment This Period

0.00

Outstanding Balance at Close of This Period

9610.65

1) SUBTOTALS This Period This Page (optional).....

42590.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CONSOLIDATED MAILING SERVICES

Nature of Debt (Purpose):
DIRECT MAIL FUNDRAISING
FOR TMP

Mailing Address 504 SHAW ROAD

City State ZIP Code
STERLING VA 20166

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.6954

Amount Incurred This Period

29596.26

Payment This Period

2531.40

Outstanding Balance at Close of This Period

27064.86

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LEGACY LIST MANAGEMENT INC

Nature of Debt (Purpose):
LIST RENTALS

Mailing Address 1155 - 15TH ST, NW

City State ZIP Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.6955

Amount Incurred This Period

14887.22

Payment This Period

0.00

Outstanding Balance at Close of This Period

14887.22

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
PATRIOT PARTNERS INC

Nature of Debt (Purpose):
DIRECT MAIL FUNDRAISING
FOR TMP

Mailing Address 1155 - 15TH ST, NW

City State ZIP Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.6956

Amount Incurred This Period

77907.56

Payment This Period

53830.77

Outstanding Balance at Close of This Period

24076.79

1) **SUBTOTALS** This Period This Page (optional).....

66028.87

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
SISK MAILING SERVICESNature of Debt (Purpose):
DIRECT MAIL FUNDRAISING
FOR TMP

Mailing Address 203 LOG CANOE CIR

City State ZIP Code
STEVENSVILLE MD 21666

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.6957

Amount Incurred This Period

4264.01

Payment This Period

0.00

Outstanding Balance at Close of This Period

4264.01

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
WASHINGTON INTELLIGENCE BUREAUNature of Debt (Purpose):
MONEY PROCESSING & ESCROW

Mailing Address 4128 PEPSI PL

City State ZIP Code
CHANTILLY VA 20151

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.6958

Amount Incurred This Period

2456.30

Payment This Period

1882.88

Outstanding Balance at Close of This Period

573.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
WEST END PRINTINGNature of Debt (Purpose):
DIRECT MAIL FUNDRAISING
FOR TMP

Mailing Address 1609 SHERWOOD AVE

City State ZIP Code
RICHMOND VA 23220

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.6959

Amount Incurred This Period

3748.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3748.00

1) SUBTOTALS This Period This Page (optional).....

8585.43

2) TOTALS This Period (last page this line number only).....

117204.30

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)